

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PAC TO THE FUTURE

ADDRESS (number and street)

700 13th Street, NW

Suite 600

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344234

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☒ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y /

in the  
State of

OR

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y /

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y /

through

M M M /

D D D /

Y Y Y Y Y Y /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Pelosi

Signature of Treasurer

Paul Pelosi

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PAC TO THE FUTURE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 01 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y 01 / 11 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2012		238872.87
(b) Cash on Hand at Beginning of Reporting Period.....	238872.87	
(c) Total Receipts (from Line 19) .....	18500.00	18500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	257372.87	257372.87
7. Total Disbursements (from Line 31) .....	120.85	120.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	257252.02	257252.02
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PAC TO THE FUTURE

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 01 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y  
 01 / 11 / 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

18500.00

18500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

18500.00

18500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

18500.00

18500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

18500.00

18500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

18500.00

18500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	120.85	120.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	120.85	120.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	120.85	120.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120.85	120.85

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18500.00	18500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18500.00	18500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	120.85	120.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	120.85	120.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<p>Full Name (Last, First, Middle Initial)  <b>A. Amy Jordan</b></p> <p>Mailing Address 119 S. Front Street</p> <p>City State Zip Code          Thorntown IN 46071</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          American Income Life Insurance Insurance Agent</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          1500.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          01 / 11 / 2012  <b>Transaction ID : C3894310</b></p> <p>Amount of Each Receipt this Period          1500.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. Melinda-Rae Lyse</b></p> <p>Mailing Address 1116 Catherine</p> <p>City State Zip Code          Naperville IL 60565</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          American Income Life Insurance Insurance Agent</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          1500.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          01 / 11 / 2012  <b>Transaction ID : C3894312</b></p> <p>Amount of Each Receipt this Period          1500.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. Marie McKellar</b></p> <p>Mailing Address PO Box 149</p> <p>City State Zip Code          Dobbs Ferry NY 10522-0149</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          N/A Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          5000.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          01 / 09 / 2012  <b>Transaction ID : C3891603</b></p> <p>Amount of Each Receipt this Period          5000.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			8000.00		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<p>Full Name (Last, First, Middle Initial)  <b>A. David M. Cohen</b></p> <p>Mailing Address 140 N. Las Palmas Avenue</p> <p>City State Zip Code  Los Angeles CA 90004</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  American Income Life Insurance Insurance Agent</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  01 / 11 / 2012  <b>Transaction ID : C3894303</b></p> <p>Amount of Each Receipt this Period  1500.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. Fred W. Hadayia</b></p> <p>Mailing Address 101 Iron Valley Drive</p> <p>City State Zip Code  Lebanon PA 17042</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  American Income Life Insurance Insurance Agent</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  01 / 11 / 2012  <b>Transaction ID : C3894313</b></p> <p>Amount of Each Receipt this Period  1500.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>c. Kristin B. Lafond</b></p> <p>Mailing Address 27 Tyler Road</p> <p>City State Zip Code  Lexington MA 02420</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  American Income Life Insurance Insurance Agent</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  01 / 11 / 2012  <b>Transaction ID : C3894304</b></p> <p>Amount of Each Receipt this Period  1500.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>4500.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<p>Full Name (Last, First, Middle Initial) <b>A. Tiffany Roland</b></p> <p>Mailing Address 1851 N 115th Place Apt. 3109</p> <p>City Omaha State NE Zip Code 68154</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer American Income Life Insurance Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1500.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 11 / 2012 <b>Transaction ID : C3894305</b></p> <p>Amount of Each Receipt this Period 1500.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. Jamison T. Weatherspoon Jr.</b></p> <p>Mailing Address 11884 Esty Way</p> <p>City Carmel State IN Zip Code 46033</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer American Income Life Insurance Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1500.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 11 / 2012 <b>Transaction ID : C3894306</b></p> <p>Amount of Each Receipt this Period 1500.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. David Ackerman</b></p> <p>Mailing Address 5 Bristol Way</p> <p>City Hightstown State NJ Zip Code 08520</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer American Income Life Insurance Occupation Insurance Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 750.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 01 / 11 / 2012 <b>Transaction ID : C3894316</b></p> <p>Amount of Each Receipt this Period 750.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		3750.00
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Ryan K. Hall**

Mailing Address 44 Black Bear Drive

City  
Waltham

State Zip Code  
MA 02451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 11 / 2012

Transaction ID : C3894308

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Angela M. Spinetta**

Mailing Address 151 Industrial Way E  
Ste. C

City  
Eatontown

State Zip Code  
NJ 07724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Income Life Insurance

Occupation  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 11 / 2012

Transaction ID : C3894309

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2250.00

18500.00